

11-16-04

2128/15
41

Express Mail ER 893953825 US.

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL
FORM

(To be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/659,951
Filing Date	9/12/2000
First Named Inventor	Omer M. Gurninar
Art Unit	2128
Examiner Name	Russell Frejd
Attorney Docket Number	94.0034

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
RECEIVED NOV 22 2004 Technology Center 2100		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Schlumberger Information Solutions	
Signature		
Printed name	Danita J.M. Maseles	
Date	November 15, 2004	Reg. No. 33,419

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Diane E. Murphy	Date	November 15, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Express Mail EL89395382548

PTO/SB/17 (10-04v2)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEES TRANSMITTAL for FY 2005		Complete if Known	
Effective 10/1/2004. Patent fees are subject to annual revision.		Application Number	09/659,951
Fees are subject to annual revision.		Filing Date	9/12/2000
Small entity claims small entity status. See 37 CFR 1.27		First Named Inventor	Omer M. Gurpinar
TOTAL AMOUNT OF PAYMENT (\$)		Examiner Name	Russell Frejd
430 -		Art Unit	2128
		Attorney Docket No.	94-0034

METHOD OF PAYMENT (check all that apply)																																			
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number 07-1078 Deposit Account Name <i>Gequest/Division of Schlumberger</i>																																			
The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.																																			
FEES CALCULATION																																			
1. BASIC FILING FEE																																			
<table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>1001 790</td> <td>2001 395</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>1002 350</td> <td>2002 175</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003 550</td> <td>2003 275</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004 790</td> <td>2004 395</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005 160</td> <td>2005 80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;">SUBTOTAL (1) (\$)</td> <td></td> <td>430 -</td> </tr> </tbody> </table>				Large Entity	Small Entity	Fee Description	Fee Paid	Fee Code (\$)	Fee Code (\$)			1001 790	2001 395	Utility filing fee		1002 350	2002 175	Design filing fee		1003 550	2003 275	Plant filing fee		1004 790	2004 395	Reissue filing fee		1005 160	2005 80	Provisional filing fee		SUBTOTAL (1) (\$)			430 -
Large Entity	Small Entity	Fee Description	Fee Paid																																
Fee Code (\$)	Fee Code (\$)																																		
1001 790	2001 395	Utility filing fee																																	
1002 350	2002 175	Design filing fee																																	
1003 550	2003 275	Plant filing fee																																	
1004 790	2004 395	Reissue filing fee																																	
1005 160	2005 80	Provisional filing fee																																	
SUBTOTAL (1) (\$)			430 -																																
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																			
<table border="1"> <thead> <tr> <th>Total Claims</th> <th>Independent Claims</th> <th>Multiple Dependent</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> <tr> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid																										
Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid																														
<table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>1202 18</td> <td>2202 9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201 88</td> <td>2201 44</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203 300</td> <td>2203 150</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204 88</td> <td>2204 44</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205 18</td> <td>2205 9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: right;">SUBTOTAL (2) (\$)</td> <td></td> <td>430 -</td> </tr> </tbody> </table>				Large Entity	Small Entity	Fee Description	Fee Paid	Fee Code (\$)	Fee Code (\$)			1202 18	2202 9	Claims in excess of 20		1201 88	2201 44	Independent claims in excess of 3		1203 300	2203 150	Multiple dependent claim, if not paid		1204 88	2204 44	** Reissue independent claims over original patent		1205 18	2205 9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2) (\$)			430 -
Large Entity	Small Entity	Fee Description	Fee Paid																																
Fee Code (\$)	Fee Code (\$)																																		
1202 18	2202 9	Claims in excess of 20																																	
1201 88	2201 44	Independent claims in excess of 3																																	
1203 300	2203 150	Multiple dependent claim, if not paid																																	
1204 88	2204 44	** Reissue independent claims over original patent																																	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent																																	
SUBTOTAL (2) (\$)			430 -																																
**or number previously paid, if greater; For Reissues, see above																																			
Other fee (specify) _____ *Reduced by Basic Filing Fee Paid																																			
SUBTOTAL (3) (\$) 430 -																																			

RECEIVED

NOV 22 2004

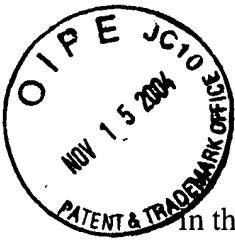
Technology Center 2100

SUBMITTED BY		(Complete if applicable)		
Name (Print/Type)	<i>Joseph J.M. MASELES</i>	Registration No. (Attorney/Agent)	33,419	Telephone 713 513-2515
Signature	<i>Want a PTO Maseles</i>		Date	Nov. 15, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

in the Application of: § Group Art. Unit: 2128
Omer M. Gurpinar, et al. § Examiner: Russell Frejd
Serial No.: 09/659,951 § Atty. Docket: 94.0034
Filed: September 12, 2000 §

For: INTEGRATED RESERVOIR OPTIMIZATION

Certificate of Mailing [37 CFR 1.8(a)]

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P. O. Box 1452, Alexandria, VA 22313-1450 on November 15, 2004

Name of the person signing this certificate: Diane E. Murphy

Signature *Diane E. Murphy*
Express mail ER 89395380548.

AMENDMENT AND RESPONSE TO OFFICE ACTION

Honorable Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

NOV 22 2004

Dear Sir or Madam:

Technology Center 2100

This is an amendment and response to an office action dated June 18, 2004.

AMENDMENTS

Please amend this application as follows:

I. In The Claims

Please amend the claims as follows

1. [Original] A method of managing a fluid and/or gas reservoir which assimilates diverse data having different acquisition time scales and spatial scales of coverage for iteratively producing a reservoir development plan that is used for optimizing an overall performance of said reservoir, comprising the steps of:

(a) generating an initial reservoir characterization,